AMENDMENT TRANSMITTAL LETTER						Docket No. 1248-0827PUS1	
Application No. 10/553,351 - Conf. #2083		Filing Date September 13, 2006		Examiner F.E. Donado		Art Unit 2617	
Applicant(s): Ken	il SAKAMOTO						
nvention: CONTI		M, BASE DEV		ESS SYSTEM, WIRI DL PROGRAM, AND			
Commissioner for P.O. Box 1450 Alexandria, VA 22: Transmitted here	313-145	ndment in the	above-identif	ied application,			
The fee has been	calculated and	d is transmitte	d as shown b	elow.			
	***************************************	CLAIM	S AS AMEN	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	11	- 22 =	0	X		0.00	
Independent Claims	2	- 3 =	0	x		0.00	
Multiple Dependent Claims (check if applicable)						0.00	
Other fee (please specify):					****************	0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					***************************************	0.00	
Please char A duplicate of A check in the	if fee is required ge Deposit Accopy of this she amount of \$ credit card. For	ount No. Cet is enclosed	is enclo	Small Entity  In the amount of \$  sed.  Deposit Account No.	a 02-2		
as described		orized to chan	ge and credit	Deposit Account No	)	440	
haranai passanan	ny overpaymen		n propossino	ees required under 3	7 CED 1 18	and 1.17	
42 6 . 7	marata	130 ( 4.20 ) 2/2/2		Dated:			
BIRCH, STEWAI 8110 Gatehouse P.C. Boy 747 Falle Church, VA United States 703-205-9000	Road, Suite 100						